

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

International Association of Holiday Inns

ADDRESS (number and street)

Three Ravinia Drive Suite 100

☐Check if different
than previously
reported. (ACC)

Atlanta

GA

30346

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00084822

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ms Eva Ferguson

Signature of Treasurer

Electronically Filed by Ms Eva Ferguson

Date

07

31

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
International Association of Holiday Inns

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		53643.45
(b) Cash on Hand at Beginning of Reporting Period	53643.45	
(c) Total Receipts (from Line 19)	29551.00	29551.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	83194.45	83194.45
7. Total Disbursements (from Line 31)	23330.00	23330.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59864.45	59864.45
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

International Association of Holiday Inns

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 0 7

To:

M M
0 6D D
3 0Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	27051.00	27051.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	2500.00	2500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	29551.00	29551.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	29551.00	29551.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	29551.00	29551.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29551.00	29551.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		23250.00	23250.00
24. Independent Expenditure (use Schedule E)		80.00	80.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		23330.00	23330.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		23330.00	23330.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	29551.00	29551.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29551.00	29551.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)

Robert Alter

Mailing Address PO Box 4240

City State Zip Code
SanClemente CA 92674

FEC ID number of contributing federal political committee.

C

Name of Employer
UnknownOccupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 07 2007

Transaction ID: SA11A1.4710

Amount of Each Receipt this Period

750.00

Contribution

B. Full Name (Last, First, Middle Initial)

Martha Howard Axford

Mailing Address 7129 Nubbibn Ridge Dr

City State Zip Code
Knoxville TN 37919

FEC ID number of contributing federal political committee.

C

Name of Employer
unknownOccupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2007

Transaction ID: SA11A1.4713

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)

Carl R Baladus

Mailing Address PO Box 1068

City State Zip Code
La Plata MD 20646

FEC ID number of contributing federal political committee.

C

Name of Employer
UnknownOccupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 04 2007

Transaction ID: SA11A1.4717

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Fredrick Blair		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address PO Box 30		Transaction ID: SA11A1.4718
City Cody	State WY	Zip Code 82414
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Unknown	Occupation Unknown	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Larry Blumberg		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 3002 Foxridge Road		Transaction ID: SA11A1.4719
City Dolthan	State AL	Zip Code 36303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer unknown	Occupation unknown	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

C. Full Name (Last, First, Middle Initial) Jerome Bolick		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address PO Box 307		Transaction ID: SA11A1.4721
City Conover	State NC	Zip Code 28613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer unknown	Occupation unknown	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Donald Bowman
Mailing Address 10702 Hopewell Road

City State Zip Code
Williamsport MD 21795

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bowman Group

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.4723

Amount of Each Receipt this Period

500.00

contribution

B. Full Name (Last, First, Middle Initial)
Richard Boyles
Mailing Address PO Box 137

City State Zip Code
Loraine OR 97451

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 7

Transaction ID: SA11A1.4725

Amount of Each Receipt this Period

1000.00

contribution

C. Full Name (Last, First, Middle Initial)
Miachel Bullis
Mailing Address 414 Rio Vista Drive

City State Zip Code
Palm Springs CA 92262

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.4729

Amount of Each Receipt this Period

250.00

contribution

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Linda Costello Mailing Address 620 Deleware Ave City Buffalo State NY Zip Code 04202 FEC ID number of contributing federal political committee. C Name of Employer unknown Occupation partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.4734 Amount of Each Receipt this Period 250.00 contribution
B. Full Name (Last, First, Middle Initial) James E Dora, Sr Mailing Address 2501 S High Scholl road City Indianapolis State IN Zip Code 46241 FEC ID number of contributing federal political committee. C Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 Transaction ID: SA11A1.4737 Amount of Each Receipt this Period 600.00 contribution
C. Full Name (Last, First, Middle Initial) Robert Dora Mailing Address 9904 North by Northwest Blvd City Fishers State IN Zip Code 46037 FEC ID number of contributing federal political committee. C Name of Employer unknown Occupation unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7 Transaction ID: SA11A1.4738 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Jay Fishman

Mailing Address 469 Thorndale Drive

City State Zip Code
 Buffalo Grove IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.4741

Amount of Each Receipt this Period

500.00

contribution

Full Name (Last, First, Middle Initial)

B. Sam J Friedman

Mailing Address 321 Starlight Point Road

City State Zip Code
 Natchitoches LA 71457

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11A1.4743

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

C. William C Gordon

Mailing Address 440 Wyndham Farmes Way

City State Zip Code
 Alpharetta GA 30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.4745

Amount of Each Receipt this Period

250.00

contribution

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) David Hart Mailing Address 617 Dingens Street City Buffalo State NY Zip Code 14206 FEC ID number of contributing federal political committee. C Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.4746 Amount of Each Receipt this Period 1250.00 contribution
B. Full Name (Last, First, Middle Initial) Mike Hembree Mailing Address 309 S Meridian Ave City Oklahoma State NE Zip Code 73108 FEC ID number of contributing federal political committee. C Name of Employer unknown Occupation unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.4747 Amount of Each Receipt this Period 500.00 contribution
C. Full Name (Last, First, Middle Initial) Michael Hoffman Mailing Address 792 Watervilt Shaker Road City Latham State NY Zip Code 12110 FEC ID number of contributing federal political committee. C Name of Employer Turf Hotels Occupation unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.4749 Amount of Each Receipt this Period 1000.00 contribution

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Dan Houseworth Mailing Address PO Box 1408 City Blytheville State AZ Zip Code 72316 FEC ID number of contributing federal political committee. C Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.4751 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table> contribuion	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	7	300.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	4		0	6		2	0	0	7																							
300.00																																
B. Full Name (Last, First, Middle Initial) Richard Jabara Mailing Address 111 Route 173 City Clifton State NJ Zip Code 06809 FEC ID number of contributing federal political committee. C Name of Employer unknown Occupation president Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.4752 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table> contribution	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0	7	750.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	4		1	1		2	0	0	7																							
750.00																																
C. Full Name (Last, First, Middle Initial) Leroy G Lail Mailing Address 2258 Highway 70 SE City Hickory State NC Zip Code 28602 FEC ID number of contributing federal political committee. C Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.4754 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table> contribution	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	7		2	0	0	7	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	2		2	7		2	0	0	7																							
500.00																																

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)

Serge Lussi,

Mailing Address 1 Olympic Drive

City State Zip Code
 Lake Placid NY 12946

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crowne Plaza Lake Pacid

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 1 / 2 0 0 7

Transaction ID: SA11A1.4756

Amount of Each Receipt this Period

1000.00

contribution

B. Full Name (Last, First, Middle Initial)

Steven J Madison

Mailing Address 2215 South 8th

City State Zip Code
 Atlanta GA 30346

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.4757

Amount of Each Receipt this Period

250.00

contribution

C. Full Name (Last, First, Middle Initial)

Bharat Mody

Mailing Address 11400 Common Oaks Dr

City State Zip Code
 Raleigh NC 27614

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: SA11A1.4762

Amount of Each Receipt this Period

500.00

contribution

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Bharat Patel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 3936 E. Emerson Ave		Transaction ID: SA11A1.4764
City Indianapolis	State IN	Zip Code 46203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer unknown		contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00

B. Full Name (Last, First, Middle Initial) Harish Patel		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address 7615 SW Beveland St		Transaction ID: SA11A1.4768
City Tiscard	State OR	Zip Code 97223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer unknown		contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial) Tushar Patel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 1520 Tramway Blvd NE		Transaction ID: SA11A1.4770
City Albuquerque	State NM	Zip Code 87112
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 251.00
Name of Employer unknown		contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00

SUBTOTAL of Receipts This Page (optional)

2501.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)

Mark B Pearsall

Mailing Address One Page Ave Ste 215

City State Zip Code
 Ashville NY 28601

FEC ID number of contributing
federal political committee.

C

Name of Employer
CFO

Occupation
Pearsall Opty Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.4772

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Thomas J, Jr. Pearsall

Mailing Address One Page Ave Ste 215

City State Zip Code
 Ashville NC 28801

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.4774

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Steven Porter

Mailing Address 143 Blackland Rd

City State Zip Code
 Atlanta GA 30342

FEC ID number of contributing
federal political committee.

C

Name of Employer
IHG, Corporation

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.4776

Amount of Each Receipt this Period

5000.00

contribution

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
James H Price
Mailing Address 1529 St Alphonsus Way

City State Zip Code
Alamo CA 94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.4778

Amount of Each Receipt this Period

250.00

contribution

B. Full Name (Last, First, Middle Initial)
Greg J Schahet
Mailing Address 141 S Meridian St

City State Zip Code
Indianapolis IN 46225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.4783

Amount of Each Receipt this Period

2000.00

contribution

C. Full Name (Last, First, Middle Initial)
David and Andrea Shamaian
Mailing Address 319 Spear Street

City State Zip Code
Natick ME 01700-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.4786

Amount of Each Receipt this Period

450.00

contribution

SUBTOTAL of Receipts This Page (optional)

2700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)

Rick Takach, Jr.

Mailing Address 701 SE Columbia Shores Blvd

City State Zip Code
Vancouver WA 98661

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwest Hospitality Group

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.4791

Amount of Each Receipt this Period

1000.00

contribution

B. Full Name (Last, First, Middle Initial)

Kongmay Wang

Mailing Address 7101 Concourse Pkwy

City State Zip Code
Douglasville GA 30134

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknown

Occupation
unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.4793

Amount of Each Receipt this Period

250.00

contribution

C. Full Name (Last, First, Middle Initial)

David Werber

Mailing Address 4052 75th St

City State Zip Code
Elmhurst NY 11373

FEC ID number of contributing
federal political committee.

C

Name of Employer
WNW Hospitality Management

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.4703

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) David Wespisar		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 22East High Street		Transaction ID: SA11A1.4794
City State Zip Code Oxford OH 45056	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	contribution	
Name of Employer unknown	Occupation unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Ron Wessel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 620 Deleware Ave		Transaction ID: SA11A1.4795
City State Zip Code Buffalo NY 04202	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	contribution	
Name of Employer unknown	Occupation unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Ken Wilson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 7
Mailing Address 8700 Trail Lake Dr		Transaction ID: SA11A1.4704
City State Zip Code Memphis TN 38125	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

A.

Full Name (Last, First, Middle Initial)

Paul Younes

Mailing Address 110 S 2nd Ave
Box 1925

City State Zip Code
Kearney NE 68848

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unknown

Occupation
Unknown

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.4798

Amount of Each Receipt this Period

500.00

contribution

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

27051.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. BLUE DOG POLITICAL ACTION COMMITTEE

Mailing Address 6849 Old Dominion Drive
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.4808

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Norm Coleman

Mailing Address 7300 Hudson Blvd Suite 270A

City St Paul State MN Zip Code 55128

Purpose of Disbursement
Political contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District:

Transaction ID: SB23.4826

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Bob Corker

Mailing Address PO Box 848

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District:

Transaction ID: SB23.4804

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Dan Boren for Congress

Mailing Address PO Box 149

City
Okemah

State
OK

Zip Code
74859

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OK District: 06

Transaction ID: SB23.4807

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. NATHAN DEAL

Mailing Address PO BOX 902

City
GAINESVILLE

State
GA

Zip Code
30503

Purpose of Disbursement
Political Donation

Candidate Name
NATHAN DEAL

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 9

Transaction ID: SB23.4815

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DONALD A. MANZULLO FOR CONGRESS

Mailing Address PO Box 7783
PO Box 7783

City
Rockford

State
IL

Zip Code
61126

Purpose of Disbursement
Political contribution

Candidate Name
DONALD A. MANZULLO FOR CONGRESS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 16

Transaction ID: SB23.4817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CLIFF STEARNS

Mailing Address PO BOX 308

City
SILVER SPRINGS

State
FL

Zip Code
34489

Purpose of Disbursement
political contribution

Candidate Name
FRIENDS OF CLIFF STEARNS

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 06

Transaction ID: SB23.4837

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CLIFF STEARNS

Mailing Address PO BOX 308

City
SILVER SPRINGS

State
FL

Zip Code
34489

Purpose of Disbursement
Political contribution

Candidate Name
FRIENDS OF CLIFF STEARNS

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 06

Transaction ID: SB23.4823

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN TANNER

Mailing Address Post Office Box 1994
Post Office Box 1994

City
Union City

State
TN

Zip Code
38281

Purpose of Disbursement
Donation

Candidate Name
FRIENDS OF JOHN TANNER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 08

Transaction ID: SB23.4812

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Max Friends of Max Baucus

Mailing Address PO Box 586

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District:

Transaction ID: SB23.4810

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. HOTEL AND ALLIED SERVICES UNION LOCAL 758 POLITICAL ACTION FUND (LOCAL 758 POLITICAL ACT

Mailing Address 330 WEST 42ND STREET 15TH FLOOR

City
NEW YORK

State
NY

Zip Code
10036

Purpose of Disbursement
Political contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.4819

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. IKE SKELTON FOR CONGRESS COMMITTEE

Mailing Address P.O. Box A

City
Harrisonville

State
MO

Zip Code
64701

Purpose of Disbursement
Political Contribution

Candidate Name

IKE SKELTON FOR CONGRESS COMMITTEE

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 04

Transaction ID: SB23.4824

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Blanche Lincoln

Mailing Address 301 4th Street NE 2nd Floors

City Washington State DC Zip Code 20002

Purpose of Disbursement

Donation

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District:

Transaction ID: SB23.4803

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LINCOLN, BLANCHE LAMBERT

Mailing Address 707 PLEASANT VALLEY DRIVE #20

City LITTLE ROCK State AR Zip Code 72212

Purpose of Disbursement

Political

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 00

Transaction ID: SB23.4827

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MCCRERY FOR CONGRESS COMMITTEE

Mailing Address Post Office Box 52956
333 Texas Street Suite 1900

City Shreveport State LA Zip Code 71135

Purpose of Disbursement
political contribution

Candidate Name
MCCRERY FOR CONGRESS COMMITTEE

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 04

Transaction ID: SB23.4830

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Mike McIntyre

Mailing Address P. O. Box 1

City
Lumberton

State
NC

Zip Code
28359

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name
Mike McIntyre

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 07

Transaction ID: SB23.4814

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. NEW CONSERVATIVE LEADERSHIP FUND

Mailing Address 228 S WASHINGTON STREET SUITE 200

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
Political contribution

Category/
Type

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 02

Transaction ID: SB23.4821

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PETERSON FOR CONGRESS

Mailing Address 26192 Floyd Lake Point Road

City
Detroit Lakes

State
MN

Zip Code
56501

Purpose of Disbursement
Political contribution

011

Category/
Type

Candidate Name
PETERSON FOR CONGRESS

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 07

Transaction ID: SB23.4816

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. PORTER FOR CONGRESS

Mailing Address PO Box 26087

City
Las Vegas

State
NV

Zip Code
89126

Purpose of Disbursement
Political Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: SB23.4813

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Charles Rangel for Congress

Mailing Address PO Box 5577

City
ManhattanvilleSta

State
NY

Zip Code
10027

Purpose of Disbursement
political contribution

Candidate Name
Charles Rangel for Congress

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District:

Transaction ID: SB23.4831

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Steny Steny Hoyer for Congress

Mailing Address 7905 Malcomb Road Ste 102

City
Clinton

State
MD

Zip Code
20735

Purpose of Disbursement
political contribution

Candidate Name
Steny Steny Hoyer for Congress

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 05

Transaction ID: SB23.4833

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. Box 48928

City
Sarasota

State
FL

Zip Code
34230

Purpose of Disbursement
political contribution

Candidate Name
VERN BUCHANAN FOR CONGRESS

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 13

Transaction ID: SB23.4841

Date of Disbursement

MM / DD / YY
06 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

23250.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) International Association of Holiday Inns		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date	
Full Name (Last, First, Middle, Initial) of Payee		<div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div></div> <div>/</div> <div><div>D</div><div>D</div></div> <div>/</div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>	
UNITEMIZED Independent Expenditures		Amount	
Mailing Address		<div style="border: 1px solid black; padding: 2px; display: inline-block;">.00</div>	
City State Zip Code		Transaction ID:	
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">80.00</div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">80.00</div>
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>	
Signature _____	Date <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div></div> <div>/</div> <div><div>D</div><div>D</div></div> <div>/</div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div>